

ISSUE SLIP STAPLE AREA (for additional cross references)

ACTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DN</i>	<i>32</i>	<i>9/4</i>
FORMALITY REVIEW	<i>SLY</i>	<i>827</i>	<i>10/8/01</i>
RESPONSE FORMALITY REVIEW	<i>CK</i>	<i>1109</i>	<i>11-16-01</i>

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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50	✓

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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579  
9/16  
15-1